Case 19-24466-GLT Doc 1 Filed 11/15/19 Entered 11/15/19 14:24:38 Desc Main Document Page 1 of 58

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
WESTERN DISTRICT OF PENNSYLVANIA	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Stephanie First name V. Middle name Hickman Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or		
	maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8802	

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Debtor 1 Stephanie V. Hickman

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live	806 Anaheim Street	If Debtor 2 lives at a different address:			
		Pittsburgh, PA 15219 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Allegheny				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	 Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. 			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Debtor 1 Stephanie V. Hickman

Case number (if known)

ar	Tell the Court About	Your E	Bankruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Required by</i> f page 1 and check the appropriat	11 U.S.C. § 342(b) for Individuals Filin te box.	ng for Bankruptcy	
	choosing to file under	■ Chapter 7						
			Chapter 11					
			Chapter 12					
			Chapter 13					
3.	How you will pay the fee	•	about how yo	u may pay. Ту <mark>ր</mark> attorney is sub	pically, if you are paying the fee yo	ck with the clerk's office in your local co ourself, you may pay with cash, cashie alf, your attorney may pay with a cred	er's check, or money	
					stallments. If you choose this option to (Official Form 103A).	on, sign and attach the Application for	Individuals to Pay	
			Ū		` ,	n only if you are filing for Chapter 7. B	y law, a judge may,	
			applies to you	ır family size aı	nd you are unable to pay the fee i	our income is less than 150% of the of n installments). If you choose this opti- cial Form 103B) and file it with your pe	on, you must fill out	
).	Have you filed for bankruptcy within the	■ N						
	last 8 years?	ПΥ						
			District		When			
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy	■ N	0					
	cases pending or being filed by a spouse who is not filing this case with	ΠY						
	you, or by a business partner, or by an affiliate?							
			Debtor			Relationship to you	-	
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your residence?	ПΝ	o. Go to l	ne 12.				
		Y	es. Has yo	ur landlord obt	ained an eviction judgment agains	st you?		
				No. Go to line	12.			
				Yes. Fill out Ir. bankruptcy pe		Judgment Against You (Form 101A) a	and file it with this	

		Document	Paue 4 01 56	
Debtor 1	Stephanie V. Hickman		Case number (if known)	

art	3: Report About Any Bu	sinesses `	You Own	as a Sole Proprietor				
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
		☐ Yes.	Name	and location of business				
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	Name of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach			er, Street, City, State & ZIP Code				
	it to this petition.			k the appropriate box to describe your business:				
				Health Care Business (as defined in 11 U.S.C. § 101(27A))				
				Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))				
				Stockbroker (as defined in 11 U.S.C. § 101(53A))				
				Commodity Broker (as defined in 11 U.S.C. § 101(6))				
				None of the above				
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance she operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow in 11 U.S.C. 1116(1)(B).					
	For a definition of small	No.	I am n	not filing under Chapter 11.				
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.				
		☐ Yes.	I am fi	iling under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.				
arí	4: Report if You Own or	Have Any	Hazardo	ous Property or Any Property That Needs Immediate Attention				
4.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is t	the hazard?				
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			liate attention is why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	S the property? Number, Street, City, State & Zip Code				

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Debtor 1 Stephanie V. Hickman

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

	capa	

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 19-24466-GLT Doc 1 Filed 11/15/19 Entered 11/15/19 14:24:38 Desc Main Document Page 6 of 58 Case number (if known) Debtor 1 Stephanie V. Hickman Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an you have? individual primarily for a personal, family, or household purpose." ■ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **2**5,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion \$0 - \$50.000 estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion

Sign Below Part 7:

For you

to be?

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

□ \$50,000,001 - \$100 million

□ \$100,000,001 - \$500 million

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11. United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Stephanie V. Hickman Signature of Debtor 2 Stephanie V. Hickman Signature of Debtor 1 Executed on

Executed on October 23, 2019

\$100,001 - \$500,000

□ \$500,001 - \$1 million

MM / DD / YYYY

MM / DD / YYYY

□ \$10,000,000,001 - \$50 billion

☐ More than \$50 billion

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Debtor 1 Stephanie V. Hickman Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Kennet	h Steidl	Date	October 23, 2019
Signature of	f Attorney for Debtor		MM / DD / YYYY
Kenneth S	Steidl 34965		
Steidl & S	teinberg		
707 Grant	r - Gulf Tower Street n, PA 15219-1908		
Number, Street,	City, State & ZIP Code		
Contact phone	412-391-8000	Email address	kenny.steinberg@steidl-steinberg.co m
34965 PA			
Bar number & S	itate		

		Docum	ent Page 8 of 58		
Fill in this infor	mation to identify your	case:			
Debtor 1	Stephanie V. Hick	kman			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT (OF PENNSYLVANIA		
Case number (if known)				[Check if this is an
Official Fo	arm 1065um				amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	issets
			of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	1,800.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	1,800.00
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	119,959.60
	Your total liabilities	\$	119,959.60
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,761.40
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,930.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.
7.	■ Yes What kind of debt do you have?		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

page 1 of 2

the court with your other schedules.

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Debtor 1 Stephanie V. Hickman

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

2,664.35

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total c	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	83,669.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	83,669.00

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		Document	Page 10 of 58		
Fill in this inform	nation to identify your	case and this filing:			
Debtor 1	Stephanie V. Hic	kman Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:	WESTERN DISTRICT OF PE	ENNSYLVANIA		
Case number _					Check if this is an amended filing
					3
_	<u>rm 106A/B</u>				
Schedul	e A/B: Prop	erty			12/15
think it fits best. B information. If more Answer every ques	e as complete and accura e space is needed, attach tion. Each Residence, Building	ate as possible. If two married pe a separate sheet to this form. On g, Land, or Other Real Estate You		esponsible for supply	ing correct
_	, , ,	e interest in any residence, build	ing, land, or similar property?		
■ No. Go to Par ☐ Yes. Where is					
Part 2: Describe	Your Vehicles				
			es, whether they are registered or not E: Executory Contracts and Unexpired L		les you own that
3. Cars, vans, tru	ucks, tractors, sport u	tility vehicles, motorcycles			
■ No					
☐ Yes					
Examples: Boa			ehicles, other vehicles, and accessor, snowmobiles, motorcycle accessories		
■ No □ Yes					
□ res					
5 Add the dolla	r value of the portion	you own for all of your entrie	es from Part 2, including any entries f	or	
					\$0.00
	Your Personal and Hous				
Í	, , ,	able interest in any of the fol	lowing items?	port Do r	rent value of the ion you own? not deduct secured ns or exemptions.
	ods and furnishings ijor appliances, furniture	, linens, china, kitchenware			
Yes. Descri	ribe				
	Summary	usehold Goods & Furnish Available Upon Request	_		\$500.00

Official Form 106A/B Schedule A/B: Property page 1

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Case number (if known) Document Debtor 1 Stephanie V. Hickman 7 Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ■ No ☐ Yes. Describe..... 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10 Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... **Clothing & Shoes** \$1,000,00 Location: 806 Anaheim Street, Pittsburgh PA 15219 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1,500.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ Yes.....

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

□ No

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Case number (if known) Document Debtor 1 Stephanie V. Hickman Institution name: Yes..... \$300.00 **Huntington Bank** 17.1. Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: 457(b) **Allegheny County** *Account is less than three years old and is Unknown not vested yet Pension **Allegheny County** *Account is less than three years old and is Unknown not vested yet 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No ☐ Yes. Institution name or individual: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them...

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements
 ■ No
 □ Yes. Give specific information about them...

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

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De	ebtor 1	Stephanie V. Hickma	n		Case number (if known)	
	Exam ■ No	ses, franchises, and other ples: Building permits, exclu Give specific information a	isive licenses, co	oles operative association h	oldings, liquor licenses, professional licens	ses
M	onev or	property owed to you?				Current value of the
	,	property enter to your				portion you own? Do not deduct secured claims or exemptions.
	■ No	funds owed to you Give specific information al	oout them, includ	ing whether you already	r filed the returns and the tax years	
		·	•	, ,	·	
	Exam		, ,	support, child support,	maintenance, divorce settlement, property	r settlement
	⊔ Yes	Give specific information				
30.		amounts someone owes y ples: Unpaid wages, disabili benefits; unpaid loans	ty insurance pay		s, sick pay, vacation pay, workers' compe	nsation, Social Security
	☐ Yes	Give specific information				
31.		sts in insurance policies iples: Health, disability, or life	e insurance; heal	th savings account (HS	A); credit, homeowner's, or renter's insura	nce
	☐ Yes	Name the insurance compa Com	any of each policy pany name:	y and list its value.	Beneficiary:	Surrender or refund value:
	If you some	aterest in property that is deare the beneficiary of a livin one has died. Give specific information			ance policy, or are currently entitled to rec	eive property because
33.		s against third parties, who ples: Accidents, employmen			r made a demand for payment sue	
	☐ Yes	Describe each claim				
	■ No		ed claims of eve	ery nature, including c	ounterclaims of the debtor and rights to	o set off claims
	☐ Yes	Describe each claim				
	■ No	nancial assets you did not	already list			
	⊔ Yes	Give specific information				
36		the dollar value of all of yo art 4. Write that number ho			entries for pages you have attached	\$300.00
Pa	rt 5: D	escribe Any Business-Related	Property You Ow	n or Have an Interest In. I	List any real estate in Part 1.	
37.	Do you	own or have any legal or equi	itable interest in a	ny business-related prop	erty?	

Official Form 106A/B Schedule A/B: Property page 4

■ No. Go to Part 6.□ Yes. Go to line 38.

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Case number (if known)

Deb	tor 1 Stephanie V. Hickman			Case number (if known)	
Part	6: Describe Any Farm- and Commercial Fishing-Rela If you own or have an interest in farmland, list it in Pa		or Have an Interes	st In.	
46. [Oo you own or have any legal or equitable inter	est in any farm- or o	ommercial fishin	ng-related property?	
	No. Go to Part 7.				
	Yes. Go to line 47.				
Part	7: Describe All Property You Own or Have an Ir	nterest in That You Dic	Not List Above		
_	Do you have other property of any kind you did Examples: Season tickets, country club membersh No I Yes. Give specific information				
	Add the dollar value of all of your entries from 8: List the Totals of Each Part of this Form	Part 7. Write that n	umber here	_	\$0.00
Part					
55.	Part 1: Total real estate, line 2				\$0.00
56.	Part 2: Total vehicles, line 5		\$0.00		
57.	Part 3: Total personal and household items, lin	ne 15	\$1,500.00		
58.	Part 4: Total financial assets, line 36		\$300.00		
59.	Part 5: Total business-related property, line 45	-	\$0.00		
60.	Part 6: Total farm- and fishing-related property	y, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+	\$0.00		
62.	Total personal property. Add lines 56 through 6	1	\$1,800.00	Copy personal property tota	\$1,800.00
63.	Total of all property on Schedule A/B. Add line	55 + line 62			\$1,800.00

Official Form 106A/B Schedule A/B: Property page 5

			111 FAUE 13 01 30	
Fill in this infor	mation to identify your	case:		
Debtor 1	Stephanie V. Hick	kman		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT O	OF PENNSYLVANIA	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.								
	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)								
	■ You are claiming federal exemptions. 11 l	J.S.C. § 522(b)(2)							
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.								
	Brief description of the property and line on Schedule A/B that lists this property	n Current value of the portion you own Copy the value from Schedule A/B Amount of the exemption you claim Check only one box for each exemption.		ount of the exemption you claim	Specific laws that allow exemption				
	Basic Household Goods & Furnishings	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)				
	Summary Available Upon Request Location: 806 Anaheim Street, Pittsburgh PA 15219 Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit					
	Clothing & Shoes Location: 806 Anaheim Street,	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(3)				
	Pittsburgh PA 15219 Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit					
	Checking: Huntington Bank Line from Schedule A/B: 17.1	\$300.00		\$300.00	11 U.S.C. § 522(d)(5)				
	Line IIIIII Schedule AVB. 17.1			100% of fair market value, up to any applicable statutory limit					
	Pension: Allegheny County *Account is less than three years old	Unknown		\$0.00	11 U.S.C. § 522(d)(12)				
	and is not vested yet			100% of fair market value, up to					

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claiming a homestead exemption of more than \$170,350?				
o adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)				
Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?				
No				
Yes				
t				

Official Form 106C

Fill in this inforr	nation to identify your	case:		
Debtor 1	Stephanie V. Hick	rman		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	WESTERN DISTRICT O	OF PENNSYLVANIA	
Case number				
(if known)				☐ Check
,				amend

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

0430 13 24400 (Docur	ment Page 1	8 of 58	J 14.24.00 L	7000 Main
Fill in this information to identify					
Debtor 1 Stephanie V	/ Hickman				
First Name	Middle Name	Last Name		_	
Debtor 2					
(Spouse if, filing) First Name	Middle Name	Last Name			
United States Bankruptcy Court for	r the: WESTERN DISTRIC	T OF PENNSYLVANI	A		
Case number					
(if known)					heck if this is an
				a	mended filing
Official Form 106E/F Schedule E/F: Credito	rs Who Have Unse	cured Claims			12/15
any executory contracts or unexpired Schedule G: Executory Contracts and Schedule D: Creditors Who Have Clai left. Attach the Continuation Page to that ame and case number (if known). Part 1: List All of Your PRIOR	I Unexpired Leases (Official Forms Secured by Property. If mor this page. If you have no inform	rm 106G). Do not include e space is needed, copy	e any creditors with pa the Part you need, fill	rtially secured claims it out, number the en	that are listed in tries in the boxes on the
Do any creditors have priority un					
No. Go to Part 2.					
Yes.					
Li Tes.					
Part 2: List All of Your NONP	RIORITY Unsecured Claims				
3. Do any creditors have nonpriorit	y unsecured claims against yo	ı ?			
☐ No. You have nothing to report	in this part. Submit this form to th	e court with your other sch	nedules.		
Yes.					
 List all of your nonpriority unsecunsecured claim, list the creditor set than one creditor holds a particular Part 2. 	eparately for each claim. For each	claim listed, identify what	type of claim it is. Do no	ot list claims already inc	luded in Part 1. If more
					Total claim
Allegheny General Ho	spital Last 4 d	igits of account number	8294		\$205.00
Nonpriority Creditor's Name PO Box 3475	When w	as the debt incurred?	2015		
Toledo, OH 43607-047		as the debt incurred?	2013		-
Number Street City State Zip 0		e date you file, the claim	is: Check all that apply		
Who incurred the debt? Che	ck one.				
Debtor 1 only	☐ Conti	ngent			
Debtor 2 only	☐ Unliq	uidated			
Debtor 1 and Debtor 2 only	y ☐ Dispu	ıted			
\square At least one of the debtors	and another Type of	NONPRIORITY unsecure	ed claim:		
☐ Check if this claim is for	a community	ent loans			
debt	Oblig	ations arising out of a sep	aration agreement or di	vorce that you did not	
Is the claim subject to offset		priority claims to pension or profit-shari	ing plane, and other sim	ilar dobte	
■ No			ing pians, and other SIM	iiai uenis	
☐ Yes	Othe	r Specify Medical			

Debto	Stephanie V. Hickman	——————————————————————————————————————	Case number (if known)			
4.2	Allegheny General Hospital	Last 4 digits of account number	8655	\$653.00		
	Nonpriority Creditor's Name PO Box 644662 Pittsburgh, PA 15264-4662	When was the debt incurred?	2013			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	\square Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	☐ Yes	Other. Specify Medical				
4.3	Ally Financial	Last 4 digits of account number	1991	\$13,645.00		
	Nonpriority Creditor's Name	_		•		
	P.o. Box 380901 Bloomington, MN 55438	When was the debt incurred?	Opened 04/12 Last Active 2/08/13			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	Other. Specify Automobile				
4.4	Capital One Services, LLC	Last 4 digits of account number	<u> 1727 </u>	\$689.75		
	Nonpriority Creditor's Name P.O. Box 30285 Salt Lake City, UT 84130	When was the debt incurred?				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community debt	☐ Student loans				
	Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			

☐ Yes

Other. Specify Credit

Document Page 20 of 58 Debtor 1 Stephanie V. Hickman se number (if known) 4.5 \$160.31 Citizens Bank NA Last 4 digits of account number 8702 Nonpriority Creditor's Name c/o Convergent Oursourcing Inc. When was the debt incurred? 800 SW 39th Street, Suite #100 PO Box 9004 Renton, WA 98057 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Consumer Debt ☐ Yes 4.6 Conserve Last 4 digits of account number 6225 \$887.00 Nonpriority Creditor's Name Po Box 7 When was the debt incurred? **Opened 08/18** Fairport, NY 14450 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No **Collection Attorney Comm Coll Of** ☐ Yes Other. Specify Allegheny County 4.7 Last 4 digits of account number **CRS Hand Clinic** 3002 \$134.00 Nonpriority Creditor's Name **Centers for Rehab Services** When was the debt incurred? 2015 PO Box 536213 Pittsburgh, PA 15253-5904 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans

Official Form 106 E/F

debt

■ No

☐ Yes

■ Other. Specify Medical

report as priority claims

 \square Obligations arising out of a separation agreement or divorce that you did not

 \square Debts to pension or profit-sharing plans, and other similar debts

☐ Check if this claim is for a community

Is the claim subject to offset?

Debtor 1 Stephanie V. Hickman

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Case number (if known)

4.8	Delatorre Orthotics & Prosthetics Inc. Nonpriority Creditor's Name PO Box 644574 Pittsburgh, PA 15264-4574 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number When was the debt incurred? 2013 As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical	\$46.43
		· · · · · · · · · · · · · · · · · · ·	
4.9	Dr. Joseph Certo Nonpriority Creditor's Name 1350 Locust Street Suite 307 Pittsburgh, PA 15219-4732	Last 4 digits of account number 0894 When was the debt incurred? 2019	\$214.00
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
4.1	Edgewood Dental Associates Nonpriority Creditor's Name	Last 4 digits of account number 3300	\$191.20
	Suite 110 Towne Centre Office	When was the debt incurred? 2018	
	1789 S. Braddock Avenue, Suite 110 Pittsburgh, PA 15218-1871 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Dental	

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Case number (if known) Document Debtor 1 Stephanie V. Hickman

4.1 1	FCNB/Spiegel & USI Solutions Inc.	Last 4 digits of account number	7456	\$575.83
	Nonpriority Creditor's Name c/o Synergetic Communication Inc. 5450 N.W. Central #220	When was the debt incurred?		
	Houston, TX 77092-2016 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	_			
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	At least one of the debtors and another	☐ Student loans	d Glaini.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	ng plans, and other similar debts	
	☐ Yes	■ Other. Specify Consumer		
		— Other. Specify		
4.1 2	Francis Costa & Welsh Dermatology	Last 4 digits of account number	5925	\$190.25
	Nonpriority Creditor's Name Suite 200	When was the debt incurred?	2013	
	1000 Stonewood Drive Wexford, PA 15090	when was the dest incurred:	2013	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	\square Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Medical		
1.1	Guardian Angel Ambulance	Last 4 digits of account number	5752	\$548.00
,	Nonpriority Creditor's Name	ge e. deebank nambol		,
	411 West Eighth Avenue PO Box 435	When was the debt incurred?	2013	
	Homestead, PA 15120 Number Street City State Zip Code	As of the date you file, the claim	is: Chack all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	s. Oneok all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other. Specify Medical		

Document Page 23 of 58 Debtor 1 Stephanie V. Hickman ase number (if known) 4.1 HSBC Bank USA, N.A. 4463 \$566.04 Last 4 digits of account number 4 Nonpriority Creditor's Name P.O. Box 2013 When was the debt incurred? through 2015 Buffalo, NY 14240 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.1 Jefferson Capital Systems, LLC 6003 \$724.60 Last 4 digits of account number 5 Nonpriority Creditor's Name 16 Mcleland Rd When was the debt incurred? **Opened 03/17** Saint Cloud, MN 56303 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No **Factoring Company Account Verizon** ☐ Yes Other. Specify Wireless Marlyn Financial Services LLC 9579 \$2,576.87 Last 4 digits of account number Nonpriority Creditor's Name 21 Yost Boulevard When was the debt incurred? Suite 301 Pittsburgh, PA 15221 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed

■ No ☐ Yes

debt

Schedule E/F: Creditors Who Have Unsecured Claims

☐ Student loans

report as priority claims

Type of NONPRIORITY unsecured claim:

■ Other. Specify Consumer Debt

 \square Obligations arising out of a separation agreement or divorce that you did not

☐ Debts to pension or profit-sharing plans, and other similar debts

At least one of the debtors and another

Is the claim subject to offset?

☐ Check if this claim is for a community

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Mattress Firm Last 4 digits of account number 9584 \$

7	Mattress Firm	Last 4 digits of account number 9584	\$958.96
	Nonpriority Creditor's Name	When we the debt in some 40 2047	
	The Waterfront 574 Waterfront Dr E	When was the debt incurred? 2017	
	Homestead, PA 15120		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Bed	
4.1	MBNA America Bank N.A.	Last 4 digits of account number 3798	\$6,763.67
8	Nonpriority Creditor's Name	Last 4 digits of account number 3/98	ψυ, ευσ.υ ε
	PO Box 15019	When was the debt incurred? 2014	
	Wilmington, DE 19886-5019		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Пол	
	_	☐ Contingent	
	☐ Debtor 2 only	Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit Card	
4.1	MedExpress Urgent Care	Last 4 digits of account number 1345	\$205.66
9	Nonpriority Creditor's Name		·
	c/o NCO Financial Systems Inc. 5 Penn Center West Suite 100	When was the debt incurred? 2013	
	Pittsburgh, PA 15276		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	Yes	Other. Specify Medical	

Document Page 25 of 58 Debtor 1 Stephanie V. Hickman ise number (if known) 4.2 \$813.66 Merrick Bank/CardWorks 2783 Last 4 digits of account number 0 Nonpriority Creditor's Name Opened 07/16 Last Active Po Box 9201 When was the debt incurred? 8/19/16 Old Bethpage, NY 11804 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Credit Card** Other, Specify 4.2 Midland Funding 4167 \$1,042.50 Last 4 digits of account number Nonpriority Creditor's Name 320 East Big Beaver When was the debt incurred? **Opened 04/17** Troy, MI 48083 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No **Factoring Company Account Credit One** ☐ Yes Other. Specify Bank N.A. 4.2 Progressive Leasing 6739 \$627.04 Last 4 digits of account number Nonpriority Creditor's Name 256 West Data Drive When was the debt incurred? Draper, UT 84020 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

debt

■ No

report as priority claims

Other. Specify Lease

 \square Obligations arising out of a separation agreement or divorce that you did not

 \square Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

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Greenville, TX 75403

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

■ No

☐ Yes

4/25/19

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not

report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

☐ Other. Specify

Educational

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c/o NCO Financial Systems Inc. 5 Penn Center West, Suite 100 Pittsburgh, PA 15276

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only

☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only

 \square At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

■ No
□ Yes

As of the date you file, the claim is: Check all that apply

☐ Contingent

Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 \square Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Medical

Document Page 28 of 58 Debtor 1 Stephanie V. Hickman ase number (if known) 4.2 **UPMC** 9800 \$96.00 Last 4 digits of account number 9 Nonpriority Creditor's Name 2 Hot Metal Street When was the debt incurred? 2019 Dist. Room 386 Pittsburgh, PA 15203 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Medical 4.3 **UPMC Presbyterian Shadyside** 2351 \$150.00 Last 4 digits of account number 0 Nonpriority Creditor's Name PO Box 382059 2013 When was the debt incurred? Pittsburgh, PA 15250-8059 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Medical West Penn Allegheny Health 4.3 2734 \$150.24 Last 4 digits of account number System Nonpriority Creditor's Name 2 Allegheny Center, 6th Floor When was the debt incurred? 2013 Pittsburgh, PA 15212 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent

Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Medical

Debt	or 1 Stephanie V. Hickman	Document Page 2	9 of 58 Case number (if known)					
4.3 2	White Deer Run Inc.	Last 4 digits of account number	8102	\$802.50				
	Nonpriority Creditor's Name c/o Absolute Credit LLC 175 Exchange Street Suite 225	When was the debt incurred?	2013					
	Bangor, ME 04401 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts					
	Yes	Other. Specify Medical						
4.3	WPAHS Physician	Last 4 digits of account number	3929	\$148.24				
<u> </u>	Nonpriority Creditor's Name c/o Credit Management Company 2121 Noblestown Road Pittsburgh, PA 15205	When was the debt incurred?	2013					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed	Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts					
	Yes	Other. Specify Medical						
4.3 4	WPIC of UPMC Presbyterian	Last 4 digits of account number	3183	\$120.00				
	Nonpriority Creditor's Name PO Box 382059	When was the debt incurred?	2013					
	Pittsburgh, PA 15250-8059 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					

Part 3: List Others to Be Notified About a Debt That You Already Listed

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

debt

■ No

☐ Yes

■ Other. Specify Medical

☐ Student loans

report as priority claims

 $\hfill\square$ Check if this claim is for a community

Is the claim subject to offset?

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

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Debtor 1 Stephanie V. Hickman

have more than one creditor for any of the debts notified for any debts in Parts 1 or 2, do not fill ou		dditional creditors here. If you do not have additional persons to be
Name and Address Ally Asset Recovery Center PO Box 78369	On which entry in Part 1 or Part 2 did Line 4.3 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims
Phoenix, AZ 85062-8369		■ Part 2: Creditors with Nonpriority Unsecured Claims
,	Last 4 digits of account number	
Name and Address Ally Financial Attn: Bankruptcy Dept	On which entry in Part 1 or Part 2 did Line 4.3 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims
Po Box 380901		■ Part 2: Creditors with Nonpriority Unsecured Claims
Bloomington, MN 55438	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did	
Amanda Casagrande MD 5608 Wilkins Avenue	Line 4.23 of (Check one):	□ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
Pittsburgh, PA 15217		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Carson Smithfield LLC	On which entry in Part 1 or Part 2 did Line 4.20 of (<i>Check one</i>):	you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims
PO Box 9216	cine 4120 of (Oneok one).	Part 2: Creditors with Nonpriority Unsecured Claims
Old Bethpage, NY 11804	Last 4 digits of account number	2519
	-	
Name and Address Chase Receivables	On which entry in Part 1 or Part 2 did Line 4.15 of (<i>Check one</i>):	you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims
1247 Broadway	cino <u>1110</u> di (dindak dila).	Part 2: Creditors with Nonpriority Unsecured Claims
Sonoma, CA 95476	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?
Community College of Allegheny County	Line 4.6 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
800 Alleghney Avenue		Part 2: Creditors with Nonpriority Unsecured Claims
Pittsburgh, PA 15233	Last 4 digits of account number	
Name and Address	-	very liet the emissional are distance
Name and Address Conserve	On which entry in Part 1 or Part 2 did Line 4.6 of (<i>Check one</i>):	you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims
Attn: Bankruptcy Dept 200 Crosskeys Office Pard		■ Part 2: Creditors with Nonpriority Unsecured Claims
Fairport, NY 14450		
	Last 4 digits of account number	
Name and Address Credit One Bank N.A.	On which entry in Part 1 or Part 2 did	· ·
P.O. Box 98873	Line 4.21 of (<i>Check one</i>):	□ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
Las Vegas, NV 89193-8873	Look 4 digite of account number	· · ·
	Last 4 digits of account number	1536
Name and Address Firstsource Advantage LLC	On which entry in Part 1 or Part 2 did Line 4.4 of (<i>Check one</i>):	
205 Bryant Woods South	Line 4.4 of (Check one).	□ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
Amherst, NY 14228	Last 4 digits of account number	— Turi 2. Ordalors with Norphority discourse diams
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?
lan Zev Ginograd, Esq.	Line 4.21 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims
Pressler Felt & Warshaw, LLP 7 Entin Road		■ Part 2: Creditors with Nonpriority Unsecured Claims
Parsippany, NJ 07054-5020	Loot 4 digite of account number	
	Last 4 digits of account number	
Name and Address Jefferson Capital Systems, LLC	On which entry in Part 1 or Part 2 did Line 4.15 of (<i>Check one</i>):	you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims
Po Box 1999		Part 2: Creditors with Nonpriority Unsecured Claims

Case 19-24466-GLT Doc 1 Filed 11/15/19 Entered 11/15/19 14:24:38 Desc Main Document Page 31 of 58 ase number (if known) Debtor 1 Stephanie V. Hickman Saint Cloud, MN 56302 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Magisterial District Judge 05-2-28 Line 4.21 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Honorable Oscar J. Petite, Jr. ■ Part 2: Creditors with Nonpriority Unsecured Claims 1901 Center Avenue One Hope Square Pittsburgh, PA 15219 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? MedExpress Billing Line 4.19 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 7964 Part 2: Creditors with Nonpriority Unsecured Claims Belfast, ME 04915-7900 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Merrick Bank/CardWorks Line 4.20 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Part 2: Creditors with Nonpriority Unsecured Claims Po Box 9201 Old Bethpage, NY 11804 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Midland Funding Line 4.21 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 2365 Northside Dr Ste 300 ■ Part 2: Creditors with Nonpriority Unsecured Claims San Diego, CA 92108 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **NCO Financial Systems** Line 4.27 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 5 Penn Center West ■ Part 2: Creditors with Nonpriority Unsecured Claims Suite 100 Pittsburgh, PA 15276 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Patenaude & Felix Line 4.24 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 501 Corporate Dr. Part 2: Creditors with Nonpriority Unsecured Claims Southpointe- Suite 205 Canonsburg, PA 15317 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Patenaude & Felix, APC Line 4.24 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 4545 Murphy Canyon Road Part 2: Creditors with Nonpriority Unsecured Claims San Diego, CA 92123 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Phillips & Cohen Associates Line **4.20** of (*Check one*): ☐ Part 1: Creditors with Priority Unsecured Claims Mail Stop 979 ■ Part 2: Creditors with Nonpriority Unsecured Claims 1002 Justison Street Wilmington, DE 19801-5148 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Portfolio Recovery Associates** Line 4.14 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 120 Corporate Boulevard, Suite 100 ■ Part 2: Creditors with Nonpriority Unsecured Claims Norfolk, VA 23502-4962 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Portfolio Recovery Associates** Line 4.14 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims POB 41067 Part 2: Creditors with Nonpriority Unsecured Claims

Name and Address

Norfolk, VA 23541

On which entry in Part 1 or Part 2 did you list the original creditor?

Last 4 digits of account number

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Stephanie V. Hickman

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Case number (if known)

Stepnanie v. Hickman		Case number (if known)	
Portfolio Recovery Associates LLC P.O. Box 12914 Norfolk, VA 23541	Line 4.18 of (Check one):	□ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims	
11011011, 17, 200-1	Last 4 digits of account number		
Name and Address Pressler & Pressler LLP 7 Entin Road Parsippany, NJ 07054	On which entry in Part 1 or Part 2 d Line 4.16 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	7045	
Name and Address Quest Diagnostics 875 Greentree Road 4 Parkway Center Pittsburgh, PA 15220-3610	On which entry in Part 1 or Part 2 di Line 4.23 of (Check one):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address Receivables Outsourcing LLC PO Box 549 Lutherville Timonium, MD 21094	On which entry in Part 1 or Part 2 di Line 4.29 of (Check one): Last 4 digits of account number	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address Stock & Grimes, LLP 804 West Avenue Jenkintown, PA 19046	On which entry in Part 1 or Part 2 d Line 4.16 of (Check one): Last 4 digits of account number	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address Target Attn: Bankruptcy Po Box 9475 Minneapolis, MN 55440	On which entry in Part 1 or Part 2 de Line 4.24 of (Check one):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address Target Card Services 3901 West 33rd Street Sioux Falls, SD 57106	On which entry in Part 1 or Part 2 di Line 4.24 of (Check one): Last 4 digits of account number	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address Tate & Kirlin Associates, Inc. 2810 Southampton Road	On which entry in Part 1 or Part 2 di Line 4.3 of (Check one):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Philadelphia, PA 19154-1207	Last 4 digits of account number	8586	
Name and Address U.S. Department of Education Ecmc/Bankruptcy Po Box 16408	On which entry in Part 1 or Part 2 de Line 4.25 of (<i>Check one</i>):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Saint Paul, MN 55116	Last 4 digits of account number		
Name and Address U.S. Department of Education Ecmc/Bankruptcy Po Box 16408 Saint Paul, MN 55116	On which entry in Part 1 or Part 2 de Line 4.26 of (Check one): Last 4 digits of account number	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address Universal Fidelity LP P.O. Box 941911 Houston, TX 77094-8070	On which entry in Part 1 or Part 2 d Line 4.5 of (Check one):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address	On which entry in Part 1 or Part 2 di	id you list the original creditor?	
ranio ana Addicas	on which chuy in Fall I Of Fall 2 0	ia you not the original orealtor!	

Name and Address

Official Form 106 E/F

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Debtor 1 Stephanie V. Hickman		Case number (if known)		
University of Pittsburgh Physicians P. O. Box 371980	Line 4.27 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims		
Pittsburgh, PA 15250-7980	Last 4 digits of account number	, ,		
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?		
UPMC Health Services	Line 4.29 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
PO Box 371472 Pittsburgh, PA 15250-7472		■ Part 2: Creditors with Nonpriority Unsecured Claims		
Fillsburgii, FA 13230-1412	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?		
Verizon Wireless	Line 4.15 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims		
1515 East Woodfield Road, Suite 1400		■ Part 2: Creditors with Nonpriority Unsecured Claims		
Schaumburg, IL 60173-5443				
	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?		
West Penn Allegheny Health System	Line 4.31 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims		
P.O. Box 848659 Boston, MA 02284		■ Part 2: Creditors with Nonpriority Unsecured Claims		
BUSION, MA UZZO4	Last 4 digits of account number	2013		
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?		
West Penn Allegheny Health System	Line 4.1 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
PO Box 6770 Pittsburgh, PA 15212		■ Part 2: Creditors with Nonpriority Unsecured Claims		
Fillsburgii, FA 13212	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?		
White Deer Run	Line 4.32 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
110 Main Street Watsontown, PA 17777-1713		■ Part 2: Creditors with Nonpriority Unsecured Claims		
Watsomown, FA 1/1/1-1/15	Last 4 digits of account number			

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 83,669.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 36,290.60
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 119,959.60

		I A A A A A A A A A A A A A A A A A A A	<u> </u>	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Stephanie V. Hicl	kman		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	WESTERN DISTRICT C	OF PENNSYLVANIA	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.2	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.5	•				
	Name				_
	Number	Street			
	City		State	ZIP Code	

		Docume	ent Page 35 o	ot 58	
Fill in thi	s information to identify your	case:			
Debtor 1	Ctonhonio V. Uio	kman			
Deptor i	Stephanie V. Hic	Middle Name	Last Name		
Debtor 2					
(Spouse if, fi	ling) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:	WESTERN DISTRICT (OF PENNSYLVANIA		
	. ,				
Case nun	nber				
(if known)					☐ Check if this is an
					amended filing
Officia	al Form 106H				
		lab taua			
Sche	dule H: Your Cod	lebtors			12/15
■ No □ Ye 2. Wi Arizo ■ No □ Ye 3. In Co	thin the last 8 years, have you na, California, Idaho, Louisiana o. Go to line 3. es. Did your spouse, former spo	u lived in a community pi , Nevada, New Mexico, Pu use, or legal equivalent live tors. Do not include your	roperty state or territonerto Rico, Texas, Washe with you at the time?	ry? (Community propert iington, and Wisconsin.) r if your spouse is filin	
Form					Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor				editor to whom you owe the debt
	Name, Number, Street, City, State and Z	IP Code		Check all schedule	es that apply:
3.1				☐ Schedule D, lin	
3.1	Name				
				☐ Schedule E/F, I	
				□ Schedule G, IIII	le
	Number Street			<u>—</u>	
	City	State	ZIP Code		
				По	
3.2	Name			Schedule D, lin	
	IVAIIIG			☐ Schedule E/F, I	
				☐ Schedule G, lin	ne
	Number Street			_	
	City	State	ZIP Code		

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Debtor 1 Stephanie V. Hickman Debtor 2 Gozen rumber Iffrag) United States Bankruptcy Court for the: WESTERN DISTRICT OF PENNSYLVANIA Case number Iffrag) United States Bankruptcy Court for the: WESTERN DISTRICT OF PENNSYLVANIA Case number Iffrag) Check if this is: Check if this is: An amended filing An amended fi											
Debtor 2 (8powse, Ifring) United Stries and States Bankruptcy Court for the: WESTERN DISTRICT OF PENNSYLVANIA Case number ("In hown") Official Form 106I Schedule I: Your Income Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for sputplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouses in not filing with you, do not include information about your spouse. If more space is needed, the properties and the properties of the properties o	Fill	in this information to identify your ca	ase:								
United States Bankruptcy Court for the: WESTERN DISTRICT OF PENNSYLVANIA Case number An amended filing A supplement showing postpetition chapter 13 income as of the following date: MM / DD/YYYY	Del	otor 1 Stephanie V	. Hickman			_					
Case number (It known) Check if this is: An amended filing A supplement showing postpetition chapter A supplement showing postpetit showing postpetition chapter A supplement showing postpetition c						_					
Official Form 106I Schedule I: Your Income 12/15 Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filling with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Occupation Fingerprint Technician Include part-time, seasonal, or self-employed work. Occupation Fingerprint Technician Include part-time, seasonal, or self-employed work. Occupation Fingerprint Technician Individe part-time, seasonal, or self-employed work. Occupation May include student or homemaker, if it applies. Occupation Pingerprint Technician Employer's name Employer's address Allegheny County Treasurer Room 108 Courthouse 436 Grant Street Pittsburgh, PA 15219-2497 How long employed there? 1.5 years Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse	Uni	ted States Bankruptcy Court for the	: WESTERN DISTRICT	Γ OF PENNSYLVANI	Ą	_					
Official Form 106I Schedule I: Your Income 12/15 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are separated and your spouse is not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question Part 1: Debtor 1 Debtor 2 or non-filing spouse Employed Not employ	Ca	se number					Chec	k if this is:			
Official Form 106 Schedule I: Your Income 12/15 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (If known). Answer every question Fart 1:	(If kı	nown)						n amende	ed filing		
Schedule I: Your Income Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are separated and your spouse is not filling with you, include information about your spouse. If you are separated and your spouse is not filling with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question Part 1:											
Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question Part 1:	0	fficial Form 106l					N	// JM / DD/ Y	YYY		
Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question Part 1:	S	chedule I: Your Inc	ome								12/15
If you have more than one job, attach a separate page with information about additional employers. Occupation Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Occupation Employer's address Allegheny County Treasurer Room 108 Courthouse 436 Grant Street Pittsburgh, PA 15219-2497 How long employed there? 1.5 years Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filling spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. List monthly gross wages, salary, and commissions (before all payroll 2. \$ 2,664.35 \$ N/A	atta Pai	ch a separate sheet to this form. t1: Describe Employment									
attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation Employer's name County of Allegheny County Treasurer Room 108 Courthouse 436 Grant Street Pittsburgh, PA 15219-2497 How long employed there? I.5 years Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 2,664.35 \$ N/A	••			Debtor 1				Debtor 2	or non-fil	ling spouse	
information about additional employers. Occupation Fingerprint Technician Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's address Allegheny County Treasurer Room 108 Courthouse 436 Grant Street Pittsburgh, PA 15219-2497 How long employed there? I.5 years Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 2,664.35 \$ N/A			Employment status	■ Employed					•		
Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's address Allegheny County Treasurer Room 108 Courthouse 436 Grant Street Pittsburgh, PA 15219-2497 How long employed there? 1.5 years Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 2,664.35 \$ N/A		information about additional		☐ Not employed				☐ Not employed			
Self-employed work. Occupation may include student or homemaker, if it applies. Employer's address and County of Allegheny Allegheny County Treasurer Room 108 Courthouse 436 Grant Street Pittsburgh, PA 15219-2497 How long employed there? 1.5 years Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 2,664.35 \$ N/A		. ,	Occupation	Fingerprint Tec	hnician						
Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 2. \$ 2,664.35 \$ N/A			Employer's name	County of Alleg	heny						
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 2,664.35 \$ N/A			Employer's address	Room 108 Cour 436 Grant Stree	tȟouse t						
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 2,664.35 \$ N/A			How long employed t	here? <u>1.5 yea</u>	rs			_			
spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 2,664.35 \$ N/A	Pai	t 2: Give Details About Mor	nthly Income								
The space of the s			ate you file this form. If	you have nothing to r	eport for	any	line, write	e \$0 in the	space. Inc	clude your nor	n-filing
List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 2,664.35 \$ N/A				ombine the informatio	n for all e	empl	oyers for	that perso	on on the lir	nes below. If y	ou need
2. deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$							For Del	btor 1			
3. Estimate and list monthly overtime pay. 3. +\$ N/A	2.				2.	\$	2	,664.35	\$	N/A	
	3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	

Official Form 106I Schedule I: Your Income page 1

2,664.35

N/A

4. Calculate gross Income. Add line 2 + line 3.

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Deb	tor 1	Stephanie V. Hickman	_	C	case n	umber (if kr	nown)				
					For I	Debtor 1			Debtor		
	Сор	y line 4 here	4.		\$	2,664	1.35	\$	-illing s	N/A	
5.	List	all payroll deductions:									
·	5a. 5b.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a 5b		\$		3.08 5.67	\$_ \$		N/A N/A	-
	5c.	Voluntary contributions for retirement plans	5c		\$—		.25	\$_		N/A	_
	5d.	Required repayments of retirement fund loans	5d	١.	\$		0.00	\$		N/A	-
	5e.	Insurance	5e	.	\$	72	2.95	\$_		N/A	-
	5f.	Domestic support obligations	5f.		\$	C	0.00	\$		N/A	_
	5g.	Union dues	5g		\$		0.00	\$_		N/A	_
	5h.	Other deductions. Specify:	5h	1.+	\$	C	0.00	+ \$		N/A	=
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	902	2.95	\$_		N/A	-
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	1,761	.40	\$_		N/A	-
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	ı .	\$	C	0.00	\$		N/A	
	8b.	Interest and dividends	8b).	\$		0.00	\$_		N/A	-
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c	: .	\$	C	0.00	\$		N/A	
	8d.	Unemployment compensation	8d	l.	\$	C	0.00	\$		N/A	-
	8e.	Social Security	8e) .	\$	C	0.00	\$		N/A	
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	e 8f. 8g		\$).00).00	\$_ \$		N/A N/A	-
	8h.	Other monthly income. Specify:	8h	1.+	\$			+ \$		N/A	-
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	5	C	0.00	\$_		N/A	<u>\</u>
10.	Cald	culate monthly income. Add line 7 + line 9.	10.	\$	1	,761.40	+ \$		N/A	= \$	1,761.40
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				,					,
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	depe			•				e J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines							12.	\$Combin	
12	Do.	you expect an increase or decrease within the year after you file this form	2							monthl	y income
13.		ou expect an increase or decrease within the year after you file this form No. Yes. Explain:	·								

Official Form 106l Schedule I: Your Income page 2

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Fill	in this informa	tion to identify yo	our case:					
Deb		Stephanie V				Check	c if this is:	
Deb	tor 2					_	An amended filing	ving postpetition chapter
	ouse, if filing)							the following date:
Unite	ed States Bankr	ruptcy Court for the	: WESTE	ERN DISTRICT OF PENNS	SYLVANIA	<u> </u>	MM / DD / YYYY	
	e number nown)							
Of	fficial Fo	rm 106J						
Sc	chedule	J: Your	Exper	ises				12/15
info	rmation. If m	and accurate as ore space is ne n). Answer eve	eded, atta	. If two married people ar ch another sheet to this n.	e filing together, be form. On the top of	oth are equa fany addition	lly responsible fon nal pages, write y	or supplying correct your name and case
Part		ibe Your House	hold					
1.	Is this a joir No. Go to							
			in a separ	ate household?				
	□N							
	□ Y	es. Debtor 2 mus	st file Offici	al Form 106J-2, Expenses	for Separate House	ehold of Debto	or 2.	
2.	Do you have	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.						☐ Yes
								□ No □ Yes
					-			□ No
								Yes
								□ No □ Yes
3.	Do your exp	enses include		No				⊔ Yes
	expenses of	f people other to d your depende	han ┌	Yes				
exp	imate your ex		our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the		n assistance an		government assistance i cluded it on <i>Schedule I:</i> Y			Your expe	enses
4.		or home owners and any rent for the		ses for your residence. In or lot.	nclude first mortgage	e 4. \$		400.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. \$		0.00
	•	rty, homeowner's				4b. \$		0.00
		maintenance, re owner's associat		upkeep expenses dominium dues		4c. \$ 4d. \$		50.00 0.00
5.				our residence, such as ho	me equity loans	5. \$		0.00

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Deb	tor 1	Stephani	ie V. Hickman	Cas	se num	ber (if known)	
6.	Utilit	ties:					
	6a.		heat, natural gas		6a.	\$	200.00
	6b.	Water, sev	ver, garbage collection		6b.	\$	0.00
	6c.	Telephone	e, cell phone, Internet, satellite, and cable	eservices	6c.	\$	180.00
	6d.	Other. Spe	ecify:		6d.	\$	0.00
7.	Food		ekeeping supplies		7.	\$	350.00
8.			hildren's education costs		8.	\$	0.00
9.			ry, and dry cleaning		9.	\$	140.00
10.		-	roducts and services		10.	· -	90.00
			ntal expenses		11.	·	10.00
12.	Tran	sportation.	Include gas, maintenance, bus or train f	are.		·	
		•	ar payments.		12.	\$	300.00
13.	Ente	rtainment,	clubs, recreation, newspapers, magaz	ines, and books	13.	\$	90.00
14.	Char	ritable cont	ributions and religious donations		14.	\$	20.00
15.	Insu	rance.	_				
	Do no	ot include in	surance deducted from your pay or inclu	ded in lines 4 or 20.			
	15a.	Life insura	nce		15a.		0.00
	15b.	Health ins	urance		15b.	\$	0.00
	15c.	Vehicle ins	surance		15c.	\$	0.00
	15d.	Other insu	rance. Specify:		15d.	\$	0.00
16.	Taxe	s. Do not in	clude taxes deducted from your pay or in	ncluded in lines 4 or 20.			
	Spec	cify:			16.	\$	0.00
17.			ease payments:				
			ents for Vehicle 1		17a.	·	0.00
			ents for Vehicle 2		17b.	·	0.00
		Other. Spe			17c.	\$	0.00
		Other. Spe			17d.	\$	0.00
18.			of alimony, maintenance, and suppor		40	Φ.	0.00
40			your pay on line 5, Schedule I, Your Ir		18.	· ·	
19.			s you make to support others who do	not live with you.	40	\$	0.00
	Spec	· —	anter anno anno anno de la cheada de la Processión		19.	.	
20.			erty expenses not included in lines 4 of son other property	or 5 of this form or on Schedule	e <i>i: Yo</i> 20a.		0.00
						· ·	0.00
		Real estat			20b.	·	0.00
			nomeowner's, or renter's insurance		20c.		0.00
			ce, repair, and upkeep expenses		20d.	·	0.00
			er's association or condominium dues		20e.	·	0.00
21.	Othe	er: Specify:	Work Lunches		21.	+\$	100.00
22.	Calc	ulate vour r	monthly expenses				
		Add lines 4				\$	1,930.00
			2 (monthly expenses for Debtor 2), if any	from Official Form 106.J-2		\$	1,000.00
			a and 22b. The result is your monthly ex			\$	4 020 00
	220.	Auu IIIIE ZZ	a and 220. The result is your monthly ex	penses.		Ψ	1,930.00
23.	Calc	ulate your r	monthly net income.				
	23a.	Copy line	12 (your combined monthly income) fron	Schedule I.	23a.	\$	1,761.40
			monthly expenses from line 22c above.		23b.	-\$	1,930.00
							,
	23c.	Subtract ye	our monthly expenses from your monthly	rincome.			400.00
			is your monthly net income.		23c.	\$	-168.60
	_						
24.			an increase or decrease in your exper				o or doorooo because of a
			u expect to finish paying for your car loan with terms of your mortgage?	in the year or do you expect your mor	ıgage	payment to increas	e or decrease decause of a
	■ No		como or your mongago:				
			Emiliate hans				
	☐ Ye	es.	Explain here:				

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Fill in this infor	mation to identify your	case:			
Debtor 1	Stephanie V. Hick				
Debter 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT O	OF PENNSYLVANIA		
Case number					
(if known)					Check if this is an amended filing
If two married p You must file th obtaining mone years, or both. 1	eople are filing together	r, both are equally responder, both are equally respondering to both are equally respondered to the connection with a bank			
		one who is NOT an attor	ney to help you fill out ba	ankruptcy forms?	
■ No					
☐ Yes.	Name of person				letition Preparer's Notice, nature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	mary and schedules filed	with this declaration and	
X /s/ Ste	phanie V. Hickman		X		
	anie V. Hickman		Signature of D	Debtor 2	
	re of Debtor 1		-		
Date	October 23, 2019		Date		

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Fil	l in this inform	nation to identify you	r case:			
	btor 1	Stephanie V. Hid				
	DIOI I	First Name	Middle Name	Last Name		
	btor 2 ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Bar	nkruptcy Court for the:	WESTERN DISTRICT OF	PENNSYLVANIA		
Ca	se number					
(if k	nown)				_	heck if this is an mended filing
<u></u>	itiaial Ea	wo 107				
	ficial For atement		Affairs for Individ	duals Filing for B	ankruptcy	4/19
info nur	ormation. If m nber (if knowr	ore space is needed, n). Answer every que	attach a separate sheet to	this form. On the top of an	equally responsible for sup y additional pages, write you	
1.		current marital statu		21100 201010		
	☐ Married■ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>ı</i> .	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	ldress:	Dates Debtor 2 lived there
3. stat					ity property state or territory ico, Texas, Washington and W	
	■ No					
	☐ Yes. Ma	ke sure you fill out Sci	hedule H: Your Codebtors (Of	ficial Form 106H).		
Pa	rt 2 Explai	n the Sources of You	r Income			
4.	Fill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part		ndar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$21,314.78	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

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Debtor 1 Stephanie V. Hickman

				Debtor 1					Debtor 2		
				Sources of Check all th			income e deductions an ions)	ıd	Sources of inc Check all that a		Gross income (before deductions and exclusions)
	last calen nuary 1 to	dar year: December 3	31, 2018)	■ Wages, bonuses, tip	commissions,		\$24,202.7	76	☐ Wages, combonuses, tips	missions,	
				☐ Operatin	g a business				☐ Operating a	business	
		dar year bef December 3		■ Wages, bonuses, tip	commissions,		\$15,911.0	00	☐ Wages, com bonuses, tips	missions,	
				☐ Operatin	g a business				☐ Operating a	business	
	winnings.	f you are filir	ng a joint cas	e and you ha	ital income; interove income that y	ou receiv	ed together, list	t it on	ly once under De	ebtor 1.	d gambling and lottery
				Debtor 1					Debtor 2		
				Sources of Describe be		each s	income from source e deductions an ions)	ıd	Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	rt 3: List	Certain Pay	ments You	Made Before	You Filed for E	Bankrup	tcy				
6.	□ No.	Neither De individual puring the Subject to Debtor 1 o	btor 1 nor D rimarily for a 90 days befo Go to line 7 List below e paid that cre not include o adjustment r Debtor 2 o 90 days befo Go to line 7 List below e include pay	personal, far pe	nily, or household or bankruptcy, did to whom you paid include payment an attorney for the and every 3 years primarily consulty or bankruptcy, did to whom you paid mestic support ob	d a total of the department of	e." y any creditor a solution of \$6,825* or monestic support cuptcy case. at for cases filed ts. y any creditor a solution of \$600 or more	total of total of total of and t	of \$6,825* or more pay tions, such as cher after the date of \$600 or more?	re? rments and the support an	
	Crodita	o Nome es-l	·		•	n4	Total amazont		Amount	Was this -	ayment for
	Creditor	s Name and	Address		Dates of paymer	116	Total amount paid		Amount you still owe	was this p	ayment for

Page 43 of 58 Document ase number (*if known*) Debtor 1 Stephanie V. Hickman Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. **Insider's Name and Address** Amount you Reason for this payment Dates of payment Total amount still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Amount you **Insider's Name and Address** Dates of payment **Total amount** Reason for this payment paid still owe Include creditor's name Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. П No Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number TD Bank USA N.A. vs. Stephanie **Civil Action Magisterial District Judge** Pending Hickman Collection 05-2-28 □ On appeal CV-0000231-2018 **Honorable Oscar Jerome** Concluded Petite Jr. 1901 Centre Avenue **Default Judgment** Pittsburgh, PA 15219 12/11/2018 **Magisterial District Judge** Midland Funding LLC vs. **Civil Action** Pending Stephanie Hickman Collection 05-2-28 □ On appeal CV-0000101-2018 Honorable Oscar J. Petite, Concluded Jr. 1901 Center Avenue **Default Judgment entered** One Hope Square 09/11/2018 Pittsburgh, PA 15219 Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below **Creditor Name and Address** Value of the Describe the Property Date property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount

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Page 44 of 58 Case number (if known) Document Stephanie V. Hickman Debtor 1 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No ☐ Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No \square Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of payment **Address** transferred or transfer was **Email or website address** made Person Who Made the Payment, if Not You Steidl and Steinberg, P.C. October 21, \$1,635.00 Suite 2830 - Gulf Tower 2019 707 Grant Street Pittsburgh, PA 15219 Allen Credit & Debt Counseling October 23, \$50.00 Agency 2019 195 Brook St East

Wessington, SD 57381

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Debtor 1 Stephanie V. Hickman

17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details.								
	Person Who Was Paid Address	Description and v	alue of any prope	erty	Date payment or transfer was made	Amount of payment			
18.	Within 2 years before you filed for bankrupte transferred in the ordinary course of your but Include both outright transfers and transfers mainclude gifts and transfers that you have already No Yes. Fill in the details.	usiness or financial affa ade as security (such as t	irs? he granting of a se						
	Person Who Received Transfer Address				nny property or received or debts change	Date transfer was made			
19.	Person's relationship to you Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details.								
	Name of trust Description and value of the property transferred Date Transfer was made								
	B: List of Certain Financial Accounts, Institution 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, association No	y, were any financial ac or other financial accour	counts or instrum	nents held in					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	clos	e account was sed, sold, ved, or nsferred	Last balance before closing or transfer			
21.	Do you now have, or did you have within 1 y cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	year before you filed for Who else had acc Address (Number, S	ess to it? D	safe deposit		Do you still have it?			
22.	Have you stored property in a storage unit o No Yes. Fill in the details.	State and ZIP Code)		ear before yo	u filed for bankrupto				
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		Do you still have it?						

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Debtor 1 Stephanie V. Hickman

Par	t 9: Identify Property You Hold or Control for S	Someone Else							
23.	Do you hold or control any property that someo for someone.	ne else owns? Include any proper	ty you borrowed from, are storing for	r, or hold in trust					
	■ No □ Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value					
Par	t 10: Give Details About Environmental Informa	ation							
For	the purpose of Part 10, the following definitions	apply:							
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.								
	to own, operate, or utilize it, including disposal sites.								
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.								
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of wher	n they occurred.						
24.	Has any governmental unit notified you that you	ı may be liable or potentially liable	under or in violation of an environme	ental law?					
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
25.									
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
26.	Have you been a party in any judicial or adminis	strative proceeding under any envi	ronmental law? Include settlements	and orders.					
	■ No □ Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case					
Par	t 11: Give Details About Your Business or Con	nections to Any Business							
27.	Within 4 years before you filed for bankruptcy, o	did you own a business or have an	ny of the following connections to any	y business?					
	☐ A sole proprietor or self-employed in a t	rade, profession, or other activity,	either full-time or part-time						
	☐ A member of a limited liability company	(LLC) or limited liability partnersh	ip (LLP)						
	☐ A partner in a partnership								
	☐ An officer, director, or managing executive of a corporation								
	☐ An owner of at least 5% of the voting or	equity securities of a corporation							

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Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

■ No

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Debtor 1	Stephanie V. Hick	kman				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States B	ankruptcy Court for the:	WESTERN DISTRICT (OF PENNSYLVANIA			
Case number f known) Check cases agreement to the control of the case agreement to the						
				amended filing		
Official Fo	orm 108			— • • • • • • • • • • • • • • • • • • •		
		n for Individu	uals Filing Under	amended filing		
Stateme	nt of Intentio			amended filing		
f you are an inc	nt of Intentio	pter 7, you must fill out t		amended filing		

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

on the form

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1	Stephanie V. Hickman	Case number (if known)	
name:	ption of	☐ Retain the property and redeem it. ☐ Retain the property and enter into a	□Yes
		Reaffirmation Agreement.	
proper securir	ng debt:	☐ Retain the property and [explain]:	-
in the info	ormation below. Do not list real estate le	Leases but listed in Schedule G: Executory Contracts and Unexpired ases. Unexpired leases are leases that are still in effect; the lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2	lease period has not yet ended.
Describe	your unexpired personal property lease	es	Will the lease be assumed?
Lessor's	name:		□ No
Description Property:	on of leased		☐ Yes
Lessor's	name:		□ No
Description Property:	on of leased		☐ Yes
Lessor's Description	name: on of leased		□ No
Property:			☐ Yes
Lessor's			□ No
Description Property:	on of leased		☐ Yes
Lessor's			□ No
Description Property:	on of leased		☐ Yes
Lessor's			□ No
Property:	on of leased		☐ Yes
Lessor's	name:		□ No
Description Property:	on of leased		☐ Yes
Part 3:	Sign Below		
Under pe		cated my intention about any property of my estate that sec	ures a debt and any personal
X /s/	Stephanie V. Hickman	x	
Ste	phanie V. Hickman nature of Debtor 1	Signature of Debtor 2	
Date	October 23, 2019	Date	

Official Form 108

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Fill in this in	formation to identify your case:				directed in this form and	d in Form
Debtor 1	Stephanie V. Hickman		122	2A-1Supp:		
Debtor 2				■ 1. There is no pres	sumption of abuse	
(Spouse, if filing				_		
United State	es Bankruptcy Court for the: Western District of	Pennsylvania	'		to determine if a presumade under Chapter 7	
Case numb	er				ficial Form 122A-2).	
(if known)]		t does not apply now by service but it could a	
				☐ Check if this is a	an amended filing	
Official	Form 122A - 1					
Chapte	er 7 Statement of Your Cur	rent Mor	thly Inc	ome		10/19
attach a sepa case number qualifying mil	te and accurate as possible. If two married people a rate sheet to this form. Include the line number to will (if known). If you believe that you are exempted fron itary service, complete and file Statement of Exempted Calculate Your Current Monthly Income	nich the addition a presumption	al information a of abuse becau	pplies. On the top of a se you do not have pri	nny additional pages, wri marily consumer debts o	te your name and or because of
	s your marital and filing status? Check one on	V.				
	married. Fill out Column A, lines 2-11.	,.				
	ried and your spouse is filing with you. Fill ou	both Columns	A and B. lines	2-11.		
	ried and your spouse is NOT filing with you.		•			
ا ا	iving in the same household and are not legal	ly separated. F	ill out both Col	lumns A and B, lines	2-11.	
	iving separately or are legally separated. Fill on benalty of perjury that you and your spouse are legiving apart for reasons that do not include evading	gally separated	under nonban	kruptcy law that appl	ies or that you and you	
101(10A). the 6 mont	average monthly income that you received from all s For example, if you are filing on September 15, the 6-md hs, add the income for all 6 months and divide the total who the same rental property, put the income from that pr	onth period would by 6. Fill in the res	be March 1 throusult. Do not includ	ugh August 31. If the am le any income amount n	ount of your monthly incornore than once. For examp	ne varied during ole, if both
				Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
	ross wages, salary, tips, bonuses, overtime, a deductions).	nd commissio	ns (before all	\$ 2,664.35	\$	
	ny and maintenance payments. Do not include n B is filled in.	payments from a	a spouse if	\$	\$	
of you from and roo	ounts from any source which are regularly pa or your dependents, including child support. In unmarried partner, members of your household ommates. Include regular contributions from a spin. In Do not include payments you listed on line 3.	Include regular your depender	contributions its, parents,	\$ 0.00	\$	
5. Net inc	come from operating a business, profession, o					
		\$ 0.00	tor 1			
	receipts (before all deductions)	-\$ 0.00				
	ry and necessary operating expenses onthly income from a business, profession, or farm		Copy here ->	\$ 0.00	\$	
	come from rental and other real property				·	
		Debi	tor 1			
Gross	receipts (before all deductions)	\$ 0.00				
	ry and necessary operating expenses	-\$ 0.00			•	
Net mo	onthly income from rental or other real property	\$	Copy here ->		\$	
7. Interes	st, dividends, and royalties			\$ 0.00	φ	

Official Form 122A-1

Debto	- · · · · · · · · ·	ed 11/15/19 ument Pag 				:24:38 [Desc	Main
				Column A Debtor 1		Column B Debtor 2 or non-filing s		
8.	Unemployment compensation			\$	0.00	\$		
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	received was a bene	fit under					
	For you\$	0.	.00					
	For you \$ For your spouse \$							
	benefit under the Social Security Act. Also, except as stand include any compensation, pension, pay, annuity, or United States Government in connection with a disability disability, or death of a member of the uniformed service pay paid under chapter 61 of title 10, then include that p does not exceed the amount of retired pay to which you if retired under any provision of title 10 other than chapter	allowance paid by the combat-related injusts. If you received an ay only to the extent would otherwise be expected by the company of the comp	ie iry or y retired that it	\$	0.00	\$		
10	Income from all other sources not listed above. Specific Do not include any benefits received under the Social Screeived as a victim of a war crime, a crime against hum domestic terrorism; or compensation, pension, pay, annulated States Government in connection with a disability disability, or death of a member of the uniformed service sources on a separate page and put the total below.	ecurity Act; payments nanity, or internationa uity, or allowance pai r, combat-related inju ss. If necessary, list o	s I or d by the iry or	\$	0.00	\$		
				\$	0.00	\$		
	Total amounts from separate pages, if any.		- +	\$	0.00	\$		
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the total		\$	2,664.35	+\$		= \$	2,664.35
Dow	Determine Whether the Manne Test Applies to	Van					incom	
Part	2: Determine Whether the Means Test Applies to	rou						
12	Calculate your current monthly income for the year.	Follow these steps:						
	12a. Copy your total current monthly income from line 1	1		Сор	y line 11 l	nere=>	\$	2,664.35
	Multiply by 12 (the number of months in a year)						X	12
	12b. The result is your annual income for this part of the	form				12b.	\$	31,972.20
13	Calculate the median family income that applies to y	ou. Follow these ste	ps:					
	Fill in the state in which you live.	PA						

Fill in the number of people in your household.

1

Fill in the median family income for your state and size of household.

53,633.00 13.

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

14. How do the lines compare?

Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. 14a.

14b. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2.

Part 3: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X /s/ Stephanie V. Hickman

Stephanie V. Hickman

Signature of Debtor 1

Date October 23, 2019

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Debtor 1	Stephanie V. Hickman	Case number (if known)	
	MM/DD/YYYY		
	If you checked line 14a, do NOT fill out or file Form 122A-2.		
	If you checked line 14b, fill out Form 122A-2 and file it with this form.		

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 19-24466-GLT Doc 1 Filed 11/15/19 Entered 11/15/19 14:24:38 Desc Main Document Page 57 of 58

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Western District of Pennsylvania

In re	Stephanie V. Hickman		Case	No	
		Debtor(s)	Chapt	er 7	
	DISCLOSURE OF COMPEN	NSATION OF ATTOR	NEY FOR	DEBTOR(S)	
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(ompensation paid to me within one year before the filing rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy, o	r agreed to be	paid to me, for services ren	dered or to
	For legal services, I have agreed to accept		. \$	1,300.00	
	Prior to the filing of this statement I have received			1,300.00	
	Balance Due		. \$	0.00	
2. \$	335.00 of the filing fee has been paid.				
3. 7	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4. Т	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5. I	I have not agreed to share the above-disclosed compe	ensation with any other person ur	iless they are i	nembers and associates of 1	my law firm.
	☐ I have agreed to share the above-disclosed compensa copy of the agreement, together with a list of the name	nes of the people sharing in the co	ompensation is	attached.	w firm. A
5. I	n return for the above-disclosed fee, I have agreed to ren	nder legal service for all aspects of	of the bankrup	cy case, including:	
b c	 Analysis of the debtor's financial situation, and render Preparation and filing of any petition, schedules, state Representation of the debtor at the meeting of creditor [Other provisions as needed] One meeting and analysis of your finance at one Section 341 Meeting, and normal of 	ement of affairs and plan which n irs and confirmation hearing, and cial problem, preparation and	nay be required any adjourned d filing of the	l; hearings thereof; bankruptcy petition, a	attendance
7. F	By agreement with the debtor(s), the above-disclosed fee Services in addition to the ones outlined P.C. Examples of additional work that we limited to; amendments to bankruptcy so the failure of the client to disclose or cor motions for relief from stay, objections to court hearings other than the originally-s	l above may be billed separa ould require payment of add chedules, adversary procee rrect information contained o discharge, reaffirmation a	ately at the d litional fees dings, lien a in the bankr greements,	and costs include, but a voidances, any work re uptcy petition, respons	are not elated to ses to
		CERTIFICATION			
	certify that the foregoing is a complete statement of any ankruptcy proceeding.	agreement or arrangement for p	ayment to me	for representation of the del	btor(s) in
0	ctober 23, 2019	/s/ Kenneth Steidl			associates of my law firm. associates of my law firm. iates of my law firm. A uding: ition in bankruptcy; reof; cy petition, attendance stee, and the client. f Steidl and Steinberg, nclude, but are not any work related to on, responses to ance at additional
	ate	Kenneth Steidl 349	65		
		Signature of Attorney Steidl & Steinberg			
		28th Floor - Gulf To	ower		
		707 Grant Street	10 1000		
		Pittsburgh, PA 152 412-391-8000 Fax:		21	
		kenny.steinberg@s			
		Name of law firm			

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United States Bankruptcy Court Western District of Pennsylvania

		viescent Bistitet of Femisjivanie		
re	Stephanie V. Hickman		Case No.	
		Debtor(s)	Chapter	_ 7
	VERIF	TICATION OF CREDITOR	MATRIX	
h	ove_named Debtor bereby verifies tha	at the attached list of creditors is true and c	orrect to the hest	of his/her knowledge
abo	ove-named Debtor hereby verifies tha	it the attached list of creditors is true and c	orrect to the best	of his/her knowledge.
te:	October 23, 2019	/s/ Stephanie V. Hickman		
		Stenhanie V Hickman	•	

Signature of Debtor